

## Electronic Patent Application Fee Transmittal

| <b>Application Number:</b>                     | 09724319  |          |        |                      |
|--|---|----------|--------|----------------------|
| <b>Filing Date:</b>                            | 27-Nov-2000                                       |          |        |                      |
| <b>Title of Invention:</b>                     | Prevention and treatment of amyloidogenic disease |          |        |                      |
| <b>First Named Inventor/Applicant Name:</b>    | Dale B. Schenk                                    |          |        |                      |
| <b>Filer:</b>                                  | Rosemarie L. Celli/Vineta Tufono                  |          |        |                      |
| <b>Attorney Docket Number:</b>                 | 15270J-004743US                                   |          |        |                      |
| Filed as Large Entity                          |   |          |        |                      |
| <b>Utility under 35 USC 111(a) Filing Fees</b> |   |          |        |                      |
| Description                                    | Fee Code  | Quantity | Amount | Sub-Total in USD(\$) |
| <b>Basic Filing:</b>                           |   |          |        |                      |
| <b>Pages:</b>                                  |   |          |        |                      |
| <b>Claims:</b>                                 |   |          |        |                      |
| <b>Miscellaneous-Filing:</b>                   |   |          |        |                      |
| <b>Petition:</b>                               |   |          |        |                      |
| <b>Patent-Appeals-and-Interference:</b>        |   |          |        |                      |
| <b>Post-Allowance-and-Post-Issuance:</b>       |   |          |        |                      |
| <b>Extension-of-Time:</b>                      |   |          |        |                      |
| Extension - 3 months with \$0 paid             | 1253  | 1        | 1110   | 1110                 |

| Description       | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|-------------------|----------|----------|--------|----------------------|
| Miscellaneous:    |          |          |        |                      |
| Total in USD (\$) |          |          |        | 1110                 |